RESEARCH REPORT

HOUSING STABILITY VALIDITY STUDY

EXTERNAL RESEARCH PROGRAM

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Housing Stability Validity Study

Final Report

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Centre for Addiction and Mental Health

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Centre for Addiction and Mental Health
Centre de toxicomanie et de santé mentale

Abstract

The Housing Stability Validity Study is the third project of a series conducted by the Community Research, Planning and Evaluation Team at the Centre for Addiction and Mental Health. The purpose of this work has been to develop concepts, tools and methods for the planning and improvement of supportive housing programs for people with serious mental illness. This report describes the validation process of the Housing Stability Model, and benchmark evaluation procedure, developed in Toronto, Ontario through application to two other local housing systems in Canada: Ottawa and Halifax.

The Community Research, Planning and Evaluation Team formed partnerships with two agencies in each city. Each partner and local steering committee participated in a benchmark evaluation procedure. Following this process, participants were asked to describe the usefulness and applicability of the model, benchmarking evaluation procedure, and recommended practices.

Through this collaborative process, the study team and participants were able to learn about the local mental health housing systems from a myriad of perspectives, and assess the extent to which the concepts and methodologies developed in one housing system in Canada are applicable to two other jurisdictions. Steering Committees also discussed the implications that noted gaps and overlaps in housing and support service delivery have on strategic directions and next steps.

Acknowledgements

John Trainor   John Sylvestre   Melanie Ollenberg
Principal Investigator   Principal Investigator   Project Co-ordinator

On behalf of the Housing Stability Validity Study Team

Résumé
L'étude de validité de la stabilité en logement

<u>Contexte, définitions et approche</u>

L'étude de validité de la stabilité en logement est le troisième d'une série de projets réalisés par la Community Research, Planning and Evaluation Team du Centre for Addiction and Mental Health. Ces travaux ont pour objet d'élaborer des concepts, des outils et des méthodes de planification et d'amélioration des programmes de logement avec services de soutien pour les personnes ayant des problèmes importants de santé mentale. La collaboration entre divers intervenants dans le domaine du logement pour les personnes ayant des problèmes de santé mentale a assuré que ces concepts, outils et méthodes sont pertinents et utiles pour les fournisseurs et les usagers de ces services de logement et de soutien.

Première étude : Réalisation du modèle de stabilité en logement

En novembre 2001, la Community Support and Research Unit a présenté à la Société canadienne d'hypothèques et de logement un rapport intitulé *« Évaluation de la stabilité en logement des personnes ayant des problèmes importants de santé mentale et à risque de devenir sans-abri »* (CSRU, 2001). Dans ces travaux, une analyse documentaire et une série de collaborations avec des intervenants multiples ont débouché sur la réalisation d'un modèle de stabilité en logement, une série initiales de repères pour améliorer la stabilité en logement des personnes ayant des problèmes importants de santé mentale, et des procédures d'évaluation des repères.

Le modèle de stabilité en logement définit l'importance de l'accès permanent, au cours de la vie d'une personne, à des logements salubres qui offrent une qualité de vie optimale. Il détermine également que la stabilité en logement découle d'une interaction

dynamique entre des facteurs dans quatre domaines clés qu'il faut comprendre et traiter efficacement, afin de promouvoir la stabilité en logement. Ce modèle est le fondement conceptuel permettant d'améliorer la stabilité en logement des personnes ayant des problèmes importants de santé mentale.

Les procédures d'évaluation des repères de la stabilité en logement ont été élaborées pour permettre aux fournisseurs de logement et à leurs partenaires de décrire leurs pratiques en matière de logement et de services de soutien dans les quatre domaines définis dans le modèle de stabilité en logement et, ensuite, de les comparer à une série de pratiques recommandées, afin d'atteindre les objectifs clés en matière de service, ou « repères ».

Modèle de stabilité en logement

Systèmes et collectivités multiples

Échange de renseignements actif et responsabilité mutuelle

Personne

Logement

Services de soutien

Communication
Partenariat
Responsabilité
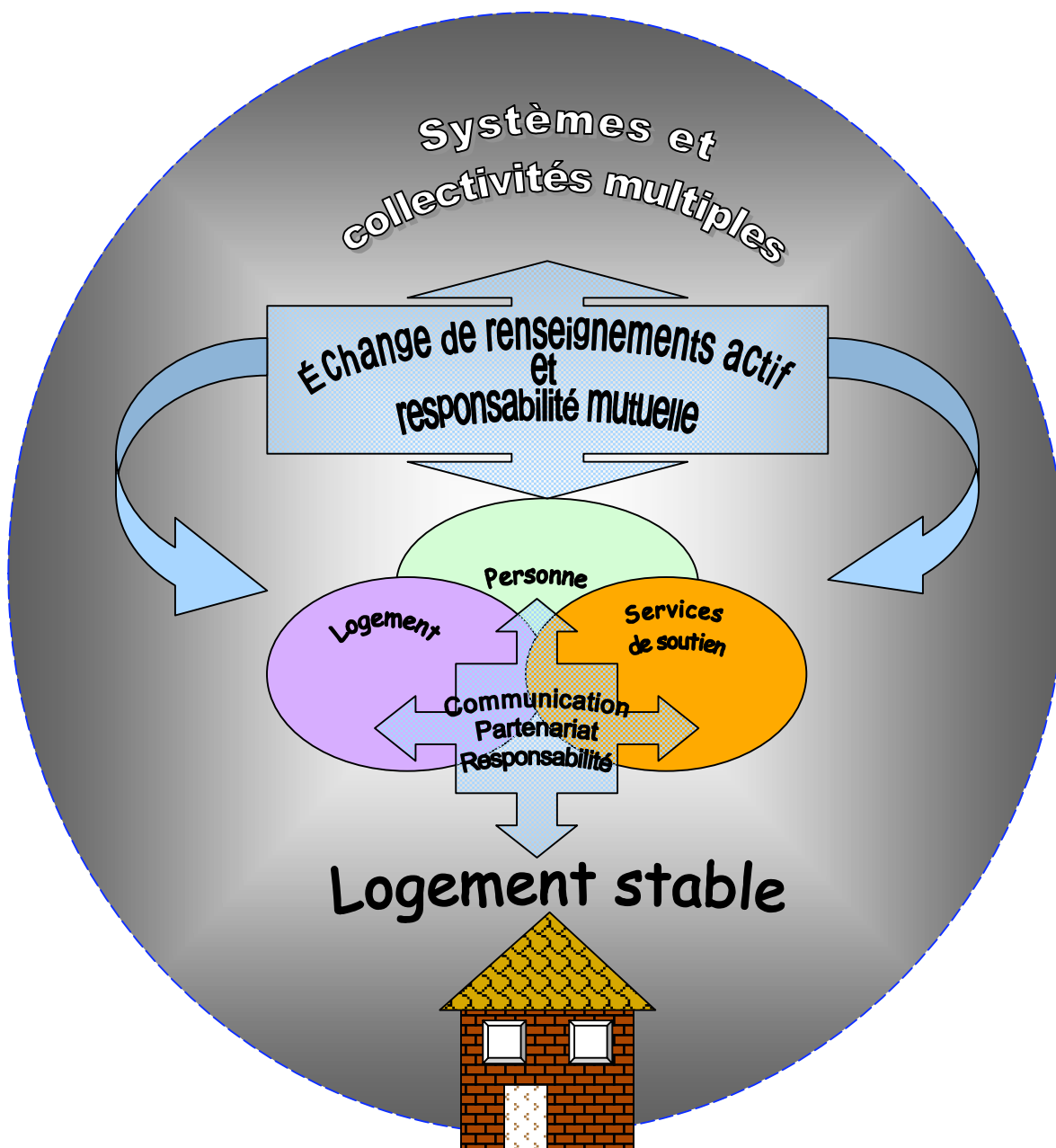
Logement stable

Deuxième étude : Mise en application du modèle de stabilité en logement – Étude d'établissement des repères et ateliers éducatifs (2002-2003)

L'étude d'établissement des repères de la stabilité en logement et les ateliers éducatifs visaient la mise en application du modèle de stabilité en logement et des procédures d'évaluation des repères, élaborés dans le cadre de l'étude précédente, au secteur du logement avec services de soutien de la ville de Toronto, lequel est diversifié.

La première phase de ce projet consistait à peaufiner les repères établis dans la première étude et à définir des pratiques recommandées pour tous les repères grâce à la collaboration d'intervenants multiples. Il a fallu recruter plus de quarante participants, recueillir des données descriptives auprès de dix partenaires dans le domaine du logement, et tenir de nombreuses discussions en groupes de travail, afin de mettre au point les pratiques en matière de logement et de services de soutien dans les quatre domaines de la stabilité en logement (personne, logement, soutien et systèmes). La deuxième phase du projet consistait à communiquer et à diffuser les pratiques rattachées aux repères aux fournisseurs de services et autres intervenants grâce à des ateliers éducatifs.

Cette démarche a débouché sur l'élaboration de quarante repères et d'une liste complète de pratiques recommandées, qui favorisent la stabilité en logement et orientent les améliorations touchant la planification des programmes, les logements et la qualité du service.

Troisième étude – Étude de validité de la stabilité en logement

Le projet en cours, ou la troisième étude, mise sur les travaux des deux projets précédents. Il combine les concepts, les outils et les méthodes élaborés dans le cadre du premier projet aux repères peaufinés et aux pratiques recommandées établis lors du deuxième projet. Il a fallu vérifier, à Ottawa et à Halifax, dans quelle mesure le processus, les méthodes, les concepts et les outils d'établissement des repères de la stabilité en logement élaborés à Toronto sont pertinents et utiles dans d'autres systèmes de logement au Canada.

Méthodes et processus

Des chercheurs ont mis à exécution une méthode d'évaluation en six étapes consécutivement à Ottawa et à Halifax. En outre, ils ont mis à l'essai deux échéanciers, la méthode d'évaluation en six étapes étant mise à exécution au cours d'une période de six mois, à Ottawa, et au cours d'une période de trois mois, à Halifax.

1. **Séances de présentation et visite des organismes**

   L'équipe de recherche a animé des séances de présentation au personnel de chaque organisme de logement. Ces séances avaient pour objectif de décrire le projet, de solliciter des commentaires sur le plan de travail proposé, d'obtenir l'engagement des organismes à participer au projet en tant que partenaires pour les repères, et de préciser les rôles et responsabilités. Le groupe d'étude a également saisi l'occasion qu'offraient ces séances pour en apprendre davantage sur les programmes et les travaux de chaque organisme participant.

2. **Détermination des priorités des organismes**

   En collaboration avec chaque organisme partenaire, l'équipe de recherche a déterminé les secteurs prioritaires et les repères sur lesquels elle se concentrerait aux fins de l'étude. Elle a ensuite aidé chaque organisme à mettre sur pied un comité directeur chargé d'examiner ses pratiques courantes, de comparer les pratiques en vigueur à celles recommandées par les fournisseurs de logements avec services de soutien, à Toronto, et de déterminer les possibilités d'amélioration des services.

3. **Collecte des données**

   Au moyen des instruments d'enquête élaborés par l'équipe de recherche, le personnel désigné de chaque organisme participant a décrit ses pratiques lui permettant d'atteindre divers repères dans les secteurs prioritaires prédéterminés. À cette étape, l'équipe de recherche a fait office de conseillère auprès des organismes en les aidant à décrire leurs pratiques.

4. **Analyse des données**

   Après avoir reçu les données des organismes partenaires, le groupe d'étude a intégré les pratiques décrites par chaque organisme dans un tableau qui permettait de comparer les pratiques de l'organisme partenaire avec celles recommandées par les fournisseurs de logements de Toronto.

5. **Séances d'examen**

   Au cours des séances d'examen, l'équipe de recherche, en collaboration avec chaque comité directeur, a examiné les pratiques en vigueur, a déterminé leurs liens avec les pratiques recommandées par les fournisseurs de logements de

Toronto, a établi des plans d'action possibles pour améliorer les services et a déterminé les difficultés éventuelles susceptibles de nuire à la mise en application des pratiques recommandées à l'échelon local.

6. **Séances de synthèse**

   L'équipe de recherche a tenu un atelier de synthèse d'une demi-journée avec chaque comité directeur pour discuter des principaux enseignements, obtenir les commentaires des participants sur la pertinence et les conditions d'application du modèle de stabilité en logement, des repères et du processus d'étude, et améliorer les concepts, les méthodes et les outils du projet. Elle a également animé une discussion sur les conséquences de ces constatations pour les prochaines étapes, l'organisme partenaire, le comité directeur et la Community Research, Planning and Evaluation Team.

Constatations clés

Affectation des ressources

À la deuxième étape du processus d'établissement des repères, l'équipe de recherche a collaboré avec chaque organisme partenaire pour déterminer les secteurs prioritaires et les repères sur lesquels elle se concentrerait aux fins de l'étude. Compte tenu des maigres ressources sur lesquelles la plupart des organismes peuvent compter, il importait de prendre conscience du fait que la disponibilité des ressources a une incidence directe sur les rôles que les organismes participants et le groupe d'étude peuvent jouer. En conséquence, il

fallait absolument négocier le partage des rôles et responsabilités, et l'affectation des ressources, dès le départ puis tout au long du projet.

Traduction des repères et des pratiques recommandées dans les administrations

Même si les participants ont initialement éprouvé des difficultés à saisir l'*établissement des repères* comme une expression ne s'entendant pas de résultats quantifiables, mais plutôt de la qualité des processus, ils ont traduit les expressions principales en synonymes conviviaux (p. ex., « outils du métier » ou « points de référence non techniques ») et, en fin de compte, ils ont considéré que le *processus d'établissement des repères* était un outil utile leur permettant de mieux comprendre leur travail, notamment les points forts et ceux nécessitant des améliorations. Lors de futurs projets d'établissement des repères, il importera de traduire les expressions en synonymes conviviaux pour que les participants puissent examiner les repères et les pratiques, et en discuter, de façon claire.

Le modèle de stabilité en logement

De manière générale, les participants ont accueilli très favorablement le modèle de stabilité en logement. Ils ont particulièrement aimé la façon dont l'usager est intégré, de manière active et sur un pied d'égalité, aux réseaux de logement et de soutien. Ils ont également aimé la simplicité du modèle, en ce que l'obtention d'un logement stable requiert la participation d'un certain nombre d'intervenants. Le modèle de stabilité en logement original (CSRU, 2001) est indiqué à la *figure 2*, et la version tenant compte des recommandations des participants

découlant de l'étude de validité de la stabilité en logement se trouve à la *figure 4* du présent rapport.

Processus de communication

Lors des séances d'examen dont il est question à la cinquième étape du processus, l'équipe de recherche a animé des discussions avec chaque comité directeur, afin d'examiner les pratiques en cours, de déterminer leurs liens avec les pratiques recommandées par les fournisseurs de logements de Toronto, d'établir les plans d'action possibles pour améliorer les services, et de déterminer les obstacles éventuels à la mise en application locale des pratiques recommandées. Il a été extrêmement avantageux de disposer d'animateurs de groupe chevronnés, car il fallait maintenir un climat de patience, de confiance et de respect, tout en s'assurant que le groupe accomplissait les tâches qui lui avaient été confiées. Le fait de permettre à tous les participants de nommer et de décrire l'expérience qu'ils ont eue avec un repère particulier était habilitant pour eux et a également permis d'avoir une lecture commune de l'expérience des intervenants différents concernant une pratique ou un repère particulier. Même s'il a été difficile d'en arriver à un consensus, les membres des comités directeurs ont apprécié de pouvoir se servir des outils et du processus en tant que remue-méninges, générateur d'idées, élément éducatif (tant pour le personnel que pour les clients) et forum d'évaluation. Ils ont également trouvé que c'était un bon moyen de constituer des réseaux avec les autres intervenants dans le domaine et de s'informer de la façon dont les divers intervenants et administrations peuvent mieux communiquer et collaborer plus efficacement.

Prochaines étapes

Dynamisés par l'expérience et les constatations de ces travaux, tous les partenaires du projet se sont attelés aux étapes subséquentes de l'étude de validité de la stabilité en logement. À Halifax et à Ottawa, des domaines concrets d'amélioration des pratiques en vigueur ont été déterminés, l'accent ayant été mis sur l'habilitation de l'usager et de la famille. En outre, les participants des organismes prévoient utiliser le guide et leur expérience du processus d'établissement des repères pour former de nouveaux partenariats et renforcer ceux qui existent déjà, tant à l'échelon local qu'à l'échelle nationale.

Parallèlement, la Community Research, Planning and Evaluation Team (CRPET) continuera de collaborer avec les organismes et les systèmes, afin de promouvoir et de soutenir les activités liées au processus d'établissement des repères, aux niveaux municipal, provincial et national. À cette fin, il faudra diffuser les constatations et les outils d'établissement des repères dans divers formats, notamment les publications et présentations didactiques, l'élaboration de listes de contrôle et de bulletins sur l'établissement des repères, et la création d'aides systémiques au niveau des politiques et des ministères.

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Intended Audience

This report is written for a number of audiences. It is intended to be a resource for executive directors, managers and staff of mental health housing and support services. It is also written to benefit community and advocacy groups as they strive to improve the quality of housing for people with serious mental illness. The report is also written for current or potential residents of supportive housing and their families. Finally, educators, researchers, housing developers and policy makers will be able to draw from this work, as a means of informing their work on a more systemic level. To improve the user-friendliness of this report, a *Glossary of Terms* has been included.

Executive Summary

Background, Definitions and Approach

The Housing Stability Validity Study is the third project of a series conducted by the Community Research, Planning and Evaluation Team at the Centre for Addiction and Mental Health. The purpose of this work has been to develop concepts, tools and methods for the planning and improvement of supportive housing programs for people with serious mental illness. Collaboration among various stakeholders in mental health housing has ensured that these concepts, tools and methods are relevant and useful for providers and consumers of these housing and support services.

Study 1: Developing the Housing Stability Model

In November 2001, the Community Support and Research Unit submitted a report to the Canada Mortgage and Housing Corporation, entitled "*Evaluating housing stability for people with serious mental illness at risk for homelessness*" (CSRU, 2001). In this work, a review of the literature and a series of multi-stakeholder collaborations led to the development of a model of housing stability, an initial set of benchmarks for improving housing stability for people with serious mental illness, and a benchmark evaluation procedure.

The Housing Stability Model identifies the importance of continuous access to housing over the course of an individual's life in promoting health and an optimal quality of life. It also identifies housing stability as a dynamic interaction between factors in four key domains, each of which must be effectively understood and addressed in order to promote housing stability. This model is the conceptual foundation for improving housing stability for people with serious mental illness.

The housing stability benchmark evaluation procedure was developed to enable housing providers and their partners to describe their current housing and support practices in the four domains identified in the housing stability model , and then to compare their practices against a set of recommended practices for achieving key service objectives, or 'benchmarks'.

A Model of Housing Stability
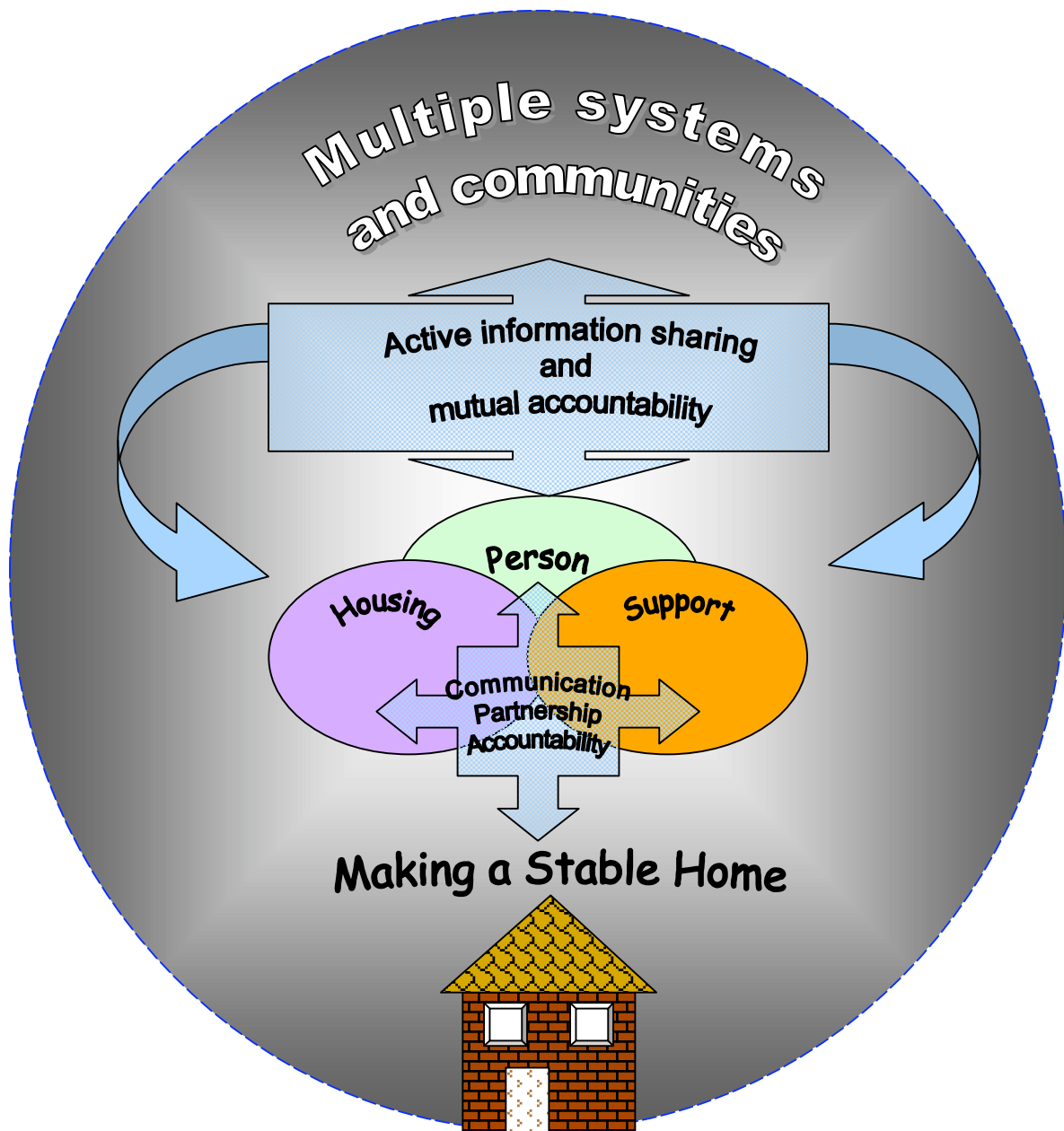
Study 2: Application of the Housing Stability Model - Benchmarking Study and Educational Workshops (2002-2003)

The Housing Stability Benchmarking Study and Educational Workshops sought to apply the Housing Stability Model and Benchmark Evaluation Procedure developed in the previous study, to the diverse supportive housing sector in the City of Toronto.

The first phase of this project involved refining the benchmarks developed in the first study and identifying recommended practices for all of the benchmarks through a multi-stakeholder collaboration. This involved the recruitment of over forty participants, the collection of descriptive data from ten housing partners, and numerous working group discussions to refine housing and support practices across the four domains of housing stability (Person, Housing, Support and Systems). The second phase of the project involved the communication and dissemination of benchmark practices to service providers and other stakeholders, through educational workshops.

End products of this approach were the development of forty Benchmarks, and a comprehensive menu of recommended practices that promote housing stability and guide improvements in program planning, housing development and service quality.

Study 3 - The Housing Stability Validity Study

The current project, or study 3, builds on the work of the two previous projects. It combines the concepts, tools and methods developed in the first project with the refined benchmarks and recommended practices developed in the second project. The project involved working in Ottawa and Halifax to examine the extent to which the housing stability

benchmarking process, methods, concepts and tools developed in Toronto, are relevant and meaningful in other Canadian housing systems.

Methods and Process

Researchers performed a six step evaluation procedure in Ottawa and Halifax consecutively. Two timelines were tested as well, with the six-step evaluation procedure occurring over six months in Ottawa and over a three month time period in Halifax.

1. **Introductory Session and Program Visits**

   The research team facilitated introductory sessions for staff at each housing agency. The goal of these sessions was to outline the project, to solicit feedback on the proposed work plan, to obtain commitment from agencies to participate as benchmark partners, and to clarify roles and responsibilities. At this time, the study team also took the opportunity to learn more about the programs and work of each participating agency.

2. **Identifying Agency Priorities**

   The research team worked with each partnering agency to determine the priority areas and benchmarks they would focus on for the purposes of the study. Each agency was then supported in developing a steering committee that would participate in reviewing agency practices, comparing existing practices with those recommended by Toronto's supportive housing community, and identifying avenues for service improvements.

3. **Data Collection**

   Using survey tools developed by the research team, designated staff from each of the participating agencies described their current practices for achieving various benchmarks within the pre-determined priority areas. During this stage of the project, the research team acted on a consultant basis for agencies, assisting them in describing their practices.

4. **Data Analysis**

   After receiving the data from the agency partners, the study team incorporated each agency's practice descriptions into a chart format, allowing for a comparison across the agency partner and Toronto-based practices.

5. **Review Sessions**

   The review sessions involved the research team working with each steering committee to review current practices, establish how they relate to practices recommended by housing providers in Toronto, identify possible action plans for service improvement, and identify possible challenges to achieving locally recommended practices.

6. **Wrap-Up Sessions**

   The research team held a half-day wrap-up workshop with each steering committee to discuss the key lessons; solicit feedback from participants on the relevance and applicability of the Housing Stability Model, benchmarks and study process; and improve the project concepts, methods and tools. The research team also facilitated a discussion around the implications of these findings for next steps, for the agency partner, steering committee, and Community Research Planning and Evaluation Team.

Key Findings

Resource Allocation

In Step 2 of the benchmarking process, the research team worked with each partnering agency to determine the priority areas and benchmarks they would focus on for the purposes of the study. Given the challenge of resources that most agencies face, it was important to realize that resource availability has a direct relationship to the roles that participating agencies and the study team are able to play. As a result, it was crucial that roles, responsibilities and resource allocation be negotiated at the onset and also throughout the project.

Translating Benchmarks and Recommended Practices Across Jurisdictions

Although participants had difficulties initially in grasping *benchmarking* as a term that was not about quantifiable outcomes but rather the quality of processes, they translated key terms into user-friendly synonyms (e.g., "tools of the trade" or "soft reference points"), and eventually saw *process benchmarking* as a useful tool to gain perspective on their work, including areas of strength and those requiring improvements. For future benchmarking projects, translating terms into user-friendly terminology will be an important step in order for participants to work through and discuss benchmarks and practices meaningfully.

The Housing Stability Model

Participants were generally very positive about the Housing Stability Model. In particular, participants liked how the consumer is actively implicated as an equal partner with housing and support networks. Participants also liked the simplicity of the model, in

that making a stable home requires the input of a number of stakeholders. The original

Model of Housing Stability (CSRU, 2001) can be found in *Figure 2*, and the version

reflecting participant recommendations from the Housing Stability Validity Study is

depicted in *Figure 4* of this report.

Communication Processes

The review sessions in Step 5 of the process involved the research team facilitating

discussions with each steering committee to review current practices, establish how

they relate to practices recommended by housing providers in Toronto, identify possible

action plans for service improvement, and identify possible challenges to achieving

locally recommended practices. It was extremely beneficial having facilitators skilled in

group facilitation, because a culture of patience, trust and respect needed to be

maintained while keeping the group on task. Giving all participants a voice to name and

describe their experience with a particular benchmark was empowering for participants

and also created a shared understanding of how different stakeholders experience a

particular benchmark or practice. Although coming to consensus was difficult, steering

group members appreciated using the tool and process as a brainstorming exercise, an

idea generator, an educator (for both staff and clients), and a forum for evaluation. They

also found it to be a good way to network with others in the field and learn how the

various stakeholders and departments could communicate and work together better.

Next Steps

Subsequent steps to the Housing Stability Validity Study, propelled by the experience

with and findings from this work, are being pursued by all project partners. In Halifax and

Ottawa, concrete areas for improving current practice have been identified, with an emphasis on consumer and family empowerment. Agency participants also plan to use the guide and their experience with process benchmarking to develop new partnerships and improve existing ones, both locally and nationally.

Coinciding with this, the Community Research, Planning and Evaluation Team (CRPET) will continue to collaborate with agencies and systems to advocate and support process benchmarking endeavours on municipal, provincial and national levels. This will involve the dissemination of findings and benchmarking tools in a variety of formats. This may include academic publications and presentations, the development of benchmarking checklists and newsletters, and the development of systemic supports at policy and ministry levels.

Housing Stability Validity Study

Background and Study Context

This project builds on earlier work conducted by the Community Research, Planning and Evaluation Team (CRPET) at the Centre for Addiction and Mental Health (CAMH). The purpose of this work has been to develop concepts and a set of tools and methods for the planning and improvement of supportive housing programs for people with serious mental illness. The focus of this work has been on collaboration among various stakeholders in mental health housing to ensure that these concepts, tools and methods are relevant and useful for providers and consumers of these housing services.

Study 1: Developing the Housing Stability Model

In a study of 300 shelter users in Toronto, Tolomiczenko and Goering (1998) found lifetime prevalence of 5.7% for psychotic disorders and 51.7% for mood disorders. Almost one third of the sample (31%) met diagnostic criteria for a current mental illness with a substance abuse disorder, while 19% met criteria for a current mental illness alone. The reasons are varied for this relationship between mental illness and homelessness. However, one contributor is the challenges facing current housing and support providers in their efforts to help these individuals cope with their illnesses and acquire the skills to become better integrated into community life (Dorvil, Morin and Robert, 2001; Trainor et al., 1993).

In November 2001, the CRPET of the Community Support and Research Unit (CSRU) submitted a report to the Canada Mortgage and Housing Corporation entitled "*Evaluating housing stability for people with serious mental illness at risk for homelessness*" (CSRU, 2001). This report describes a first project through which the research team collaborated with a small number of housing providers, consumer/survivors, consumer advocates and family members to develop a concept of housing stability, a procedure, and a set of tools for comparing a housing agency's current practices against a set of recommended practices. The project led to the development of a model of housing stability that identified the importance of continuous access to housing over the course of an individual's life, promoting health and an optimal quality of life. This is achieved through flexible housing programs and housing systems that are responsive to, and can accommodate, an individual's changing needs and preferences over time.

This conceptual work identified housing stability as a dynamic interaction between factors in three key domains, each of which must be effectively addressed in order to promote housing stability. These domains include:

- Person factors – particularly in relation to screening and assessment procedures that promote an optimal fit between the individual's preferences and available housing and support options.
- Housing factors – including providing housing that is of high quality (e.g., safe, clean, positive social atmosphere, private), that has security of tenure (e.g., legal tenancy), that has the capacity for flexibility, that has the capacity for rehabilitation and that is accountable to the individual.
- Support factors – including support that provides individuals with appropriate information about the housing market and their rights as tenants, that adapts to individuals' changing needs and preferences and that supports them in achieving their personal goals (including informal support networks of peers and family).

Figure 1

The Critical Factors of Housing Stability

Systemic Factors

Systemic Factors

Person: Promoting an optimal fit between the individual and available housing and support options.

Housing: Providing housing that is safe, clean, flexible, private, secure, accountable to the individual, and through its physical structure and appearance in the neighbourhood, promotes opportunities for community integration and rehabilitation.

Support: Providing appropriate information about the housing market and tenant rights, adapting to individuals' changing needs and preferences, helping tenants achieve their personal goals, and respecting and supporting the development of informal support networks (e.g., peers, family members, etc.).

Additionally, the model incorporates the dynamic interaction between factors in these three key domains and the broader systemic factors, namely the agency system (which includes agency policies, managerial and administrative structures), the inter-agency system (which includes inter-agency networks and partnerships), the mental health system (the major funder of dedicated mental health housing for the jurisdiction being studied), the generic housing market system and broader social, political and economic factors (all of which influence the amount, type and quality of housing available).

Figure 2

A Model of Housing Stability – Part 1 (CSRU, 2001)

A Model of Housing Stability   <u>Part 1</u>
Systemic Factors (Social, Political, Economic)
Housing System and Related Market Factors
Health Care System
Agency and Inter -Agency Systems

SUPPORT

PERSON   HOUSING

Making A Stable Home

MONITORING HOUSING STABILITY
INFORMATION
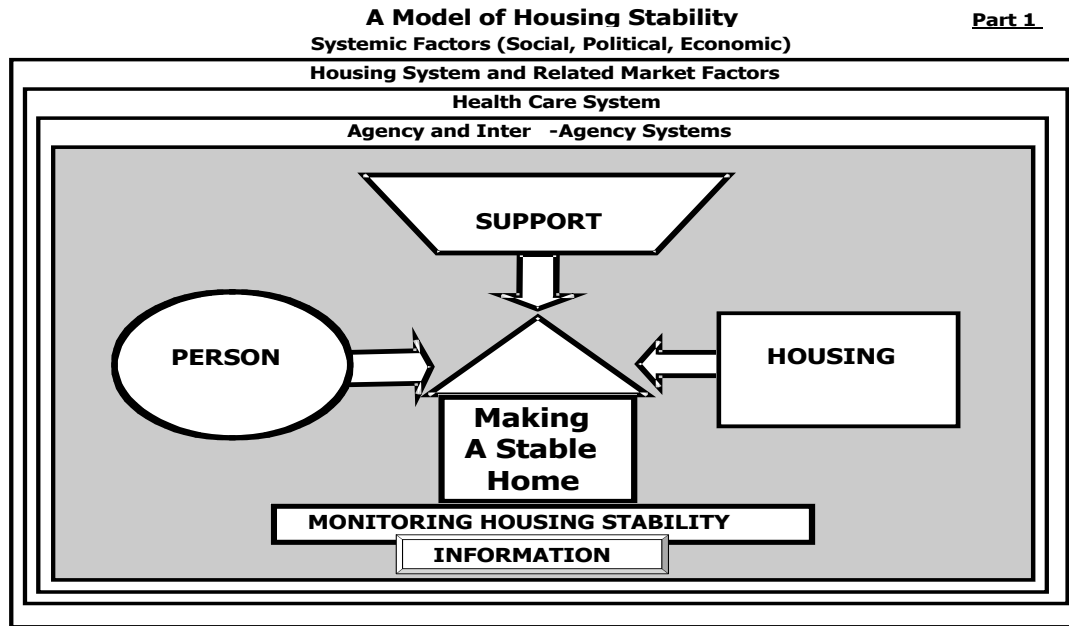
In 2001, this conceptual model of housing stability was depicted in two parts. The first (Figure 2, above) outlined that having a fit between these three dimensions (Personal choice, Support systems, and Housing quality and Maintenance) of housing stability results in a psychological sense of home, reflecting a sense of empowerment, control, satisfaction, comfort, social support, and belonging both in the home and the neighbourhood.

Part 2 (not shown here) describes the processes involved in the ongoing monitoring of housing stability, specifying how the ability to monitor effectively depends upon a solid foundation of relevant, up-to-date information that is accessible to all parties concerned. If problems are detected that might threaten housing stability, the first consideration is whether or not changes can be made to improve the current housing situation. If the answer is yes, the consumer is able to maintain stable housing. If the answer is no, the second consideration is whether or not different housing can be found that allows for a better fit between person, support and housing factors. If the answer is yes, the consumer is able to acquire more suitable housing. If the answer is no, the consumer may 1) maintain current unstable housing, 2) acquire different unstable housing, or 3) become homeless.

A benchmark evaluation procedure was also developed in this study. Vassallo (2000) describes that benchmarking and evidence-based practices are complementary and can be

used together to improve operational performance. By sharing and comparing information, and by identifying examples of good practice and areas for improvement, organizations have used benchmarking for process improvement and to develop more positive experiences for service recipients (Ellis, 2002; Czarnecki, 1996).

> **Benchmarking** in health care settings refers to "the continual and collaborative discipline of measuring and comparing the results of key work processes with those of best performers. It is learning how to adapt these best practices to achieve breakthrough process improvements and build healthier communities."
> (Gift & Mosel, 1994, p. 5)

For the purposes of this work, benchmarking involves comparing current practices against a set of practices that have been demonstrated effective for achieving a set of service objectives or benchmarks. Accordingly, a housing stability benchmark evaluation procedure was developed to enable housing providers and their partners to describe their current housing and support practices in several key domains and then to compare their practices against a set of recommended practices for achieving key benchmark service objectives. A set of provisional benchmark service objectives was established through work with the project steering committee and a review of research, program evaluations and program description literature. Benchmark service objectives and practices were considered provisional because no true benchmarking study was conducted to identify exemplary practices currently in place in a particular mental health housing system.

Study 2: Application of the Housing Stability Model – Benchmarking Study and Educational Workshops (2002-2003)

Based on their first study just described, the Community Research, Planning and Evaluation Team launched a second project in Toronto to refine the conceptual model of housing stability and benchmarks, and to establish a set of recommended practices for achieving these benchmarks, that were relevant to the local housing system. Benchmarks identified in this study are not intended as service standards. Instead, these benchmarks identify a variety of service objectives that most housing providers can or already strive to achieve to promote housing stability for people with serious mental illness. The benchmarking process provides an opportunity to compare how different housing providers work to achieve these common service objectives. The purpose of these comparisons is to develop a list of recommended practices and identify opportunities for service improvements.

The Housing Stability Benchmarking Study and Educational Workshops involved two phases. The first phase involved refining the benchmarks developed in the first study, and identifying recommended practices for all the benchmarks, through a multi-stakeholder collaboration. This involved the recruitment and collaboration of forty-one (41) representatives from twenty (20) consumer/survivor groups, housing and support agencies and the municipal

and provincial government. The first phase also involved the collection of descriptive data from benchmarking partners, and the facilitation of working group (See Appendix A - *Glossary of Terms* for a description of working group and benchmark partner roles) discussions to refine and recommend housing and support practices across the domains of housing stability (Person, Housing, Support and Systems). The second phase of the project involved the dissemination of benchmark practices to service providers through educational workshops. These workshops provided a forum for discussing strategies for implementation and the challenges associated with service improvement.

Phase I and II of the Housing Stability Benchmarking Study
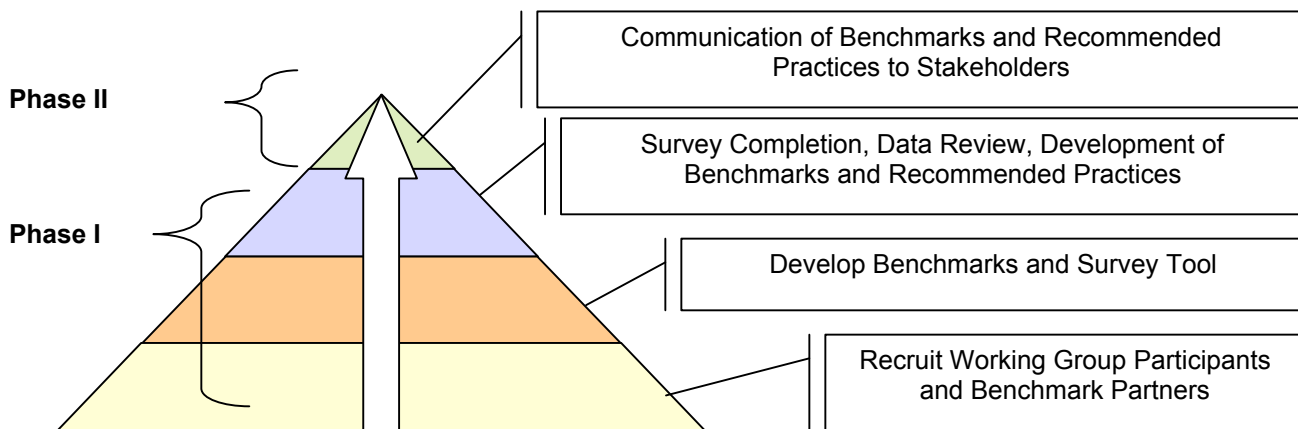
One outcome of this study was the creation of "*A Guide to Improving Housing Stability*", a booklet outlining the recommended practices for achieving each of the forty (40) benchmarks and across Person, Housing, Support and System domains of the Housing Stability Model (See Appendix B for a list of Benchmarks across the four domains). In addition to this concrete outcome, several findings regarding process were noted, including:

➤ Having a broad membership in the working group facilitates a natural cross-pollination of perspectives and knowledge
➤ Participants were very appreciative of working within a study that was flexible and accommodating to their needs, especially around allowing varying degrees of participation
➤ As participants saw their suggestions being taken seriously, there was an increased sense of ownership of the work, project outcomes, and dissemination of material
➤ Participants described an increased sense of capacity to make changes on micro, meso and macro levels, with the help of the guide

> ➢ Several agencies applied findings to improve housing stability for people with mental illness
> ➢ Participants developed a strong understanding of the Housing Stability Model
> ➢ Participants described a number of immediate applications of the guide, including program evaluation, staff education and program planning

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Study 3 - The Housing Stability Validity Study

The current project builds on the work of the two previous studies. It combines the concepts, tools and methods developed in the first project with the refined benchmarks and recommended practices developed in the second one. This study involved working in Ottawa and Halifax to examine the extent to which the housing stability benchmarking process, methods, concepts and tools developed in Toronto, are relevant and meaningful in other Canadian housing systems.

Project Goals

The Housing Stability Validity Study examines the validity of a conceptual model of housing stability for people with serious mental illness, and a housing stability benchmark evaluation procedure designed for use by housing agencies and their partners. The study goals are threefold:

1. Examine the validity of a conceptual model of housing stability developed in Toronto, Ontario, by testing its applicability in two other local housing systems in Canada.
2. Examine the validity of a benchmark evaluation procedure developed in Toronto, Ontario, by testing its applicability in two other local housing systems in Canada.
3. Study local mental health housing systems in two cities using a benchmark evaluation procedure.

Methods and Process

This study is grounded in the previously described model of housing stability and by the Housing Stability Evaluation Procedure developed by the Community Support and Research Unit (2001). The Housing Stability Evaluation Procedure aims to facilitate the review of a particular program's practices in a number of areas that have been linked to housing stability for people with serious mental illness, across the key areas identified in the Housing Stability Model (Person, Housing, Support and Systems).

Guided by the Housing Stability Model, this study uses a four-section *Housing Stability Survey* to collect practice descriptions, which in turn are compared to recommended practices through a collaborative sharing of knowledge and experience among key stakeholders. Appendix C provides one of the four Survey sections, to give the reader an idea of what questions were asked across the four domains of housing stability. The process involves discussions of current practices, the extent to which they appear to fall short, meet or exceed

the recommended practices, and the prospects for improving current practices so that can meet or exceed the recommended practices. In the case of the latter, action plans are created to improve the program.

Promoting housing stability for people with serious mental illness requires collaboration among a range of partners, so an important purpose of this evaluation procedure is to foster greater communication among stakeholders. Although it is becoming more and more common to see best practices written alongside details regarding implementation (Coursey, et al, 2000), it is still quite rare to see research literature that offers instructions for how services and programs can best be organized and delivered to promote best practice. By convening a steering committee that includes broad representation from program stakeholders, a consensus can be achieved on the adequacy and effectiveness of a program's practices, and on the steps required and the obstacles to overcome in reforming a program's practices. Additionally, having relevant partners collaborate on the evaluation will facilitate data collection and the specifying and carrying out of action plans.

This study implemented a six steps evaluation procedure with four agencies in Ottawa and Halifax. Two timelines were used, with the six-step evaluation procedure occurring over six months in Ottawa and over a three month time period in Halifax. In addition to direct support from the research team throughout the course of the project, financial support was available to alleviate some of the agencies' costs for participating. The six steps are described below:

Step 1: Introductory Session and Program Visits

In this first step, the research team facilitates an introductory session for staff at each housing agency involved. The goal of these sessions is to outline the background of the project, solicit feedback on the proposed work plan for the project, and gain commitment from agencies to participate in the study. The study team also takes the opportunity to learn more about the programs and work of each agency.

This introductory session is quite valuable in affording agencies time to absorb the new concepts and processes being proposed. For instance, the use of Process Benchmarking as a strategy for service improvement is not only a new term, but requires some discussion to clarify its intent as an opportunity to share wisdom rather than impose standards. The discussion of the local mental health housing system also gives the study team insight into the similarities and differences between housing systems, which in turn influences the comparison of perceptions of housing stability, and subsequent practice descriptions between the partner agency and Toronto's supportive housing community (see Step 5).

In Ottawa, the study team partnered with Ottawa Salus Corporation and the Canadian Mental Health Association – Ottawa Branch. In Halifax, Metro Community Housing Association and Metro Non-Profit Housing Association participated as partners. Members from the CRPET, and a cross-section of the agency's staff members attended each of these sessions. In Ottawa, due to their proximal location and desire to be involved, a representative from the Canada Mortgage and Housing Corporation attended as well. The study team introduced the

Model of Housing Stability (*Figure 4*), the history and context of the current project, and clarified terms, roles and remunerations. Following a discussion of these details, the host agency was invited to describe their housing and support services, unique programs, and the context of Ottawa's mental health housing system.

Step 2: Identifying Agency Priorities

The purpose of this step is to determine which benchmark areas and benchmarks agencies would prefer to focus on in their steering committee discussions. Also, agency staff are supported in developing their steering committee. In this study, The CRPET supported agencies in developing steering committees. Once the committees were developed, members of the CRPET visited with staff and steering committee participants in Ottawa and Halifax to:

- Provide an overview of the project, its concepts, methods and tools;
- Clarify roles and responsibilities across the established project timeline and sign partnership agreements accordingly;
- Answer questions or concerns that members have regarding the study concepts, methods, or tools; and
- Identify which benchmarks would be targeted in their practice descriptions and subsequent steering committee review sessions (Step 5).

Although there was slight overlap between the discussions in Step 1 and 2, each step is crucial for obtaining informed participation. The introductory session is important to set the stage, and to ensure the agency makes an informed decision if and when they agree to participate in the study. The second meeting with steering committee participants and staff completing the survey involves individuals who may or may not have been exposed to the initial discussion that discussed context, methods and commitments. Meeting with the steering committee is also important for giving participants the opportunity to think about the concepts of process benchmarking and housing stability in a meaningful, well-paced way, prior to the review sessions in Step 5.

In Ottawa, one agency was unprepared to host a half-day steering committee discussion in time for our pre-scheduled visit. In order to be flexible to the pace of the agency, while considering the time-sensitive nature of the project, the study team used the meeting time to inform staff of the project, study tool, and provide information packages to allow them to introduce concepts, methods and responsibilities to steering committee participants. The study team emphasized the need for participants to receive the package well before the benchmark review sessions, to ensure they were comfortable and informed of their role in the study. As a result, the agency staff met with many of the steering committee participants individually to review the material at a suitable pace, eliminating the need to repeat an introductory session for new participants.

Having learned that this process was effective in eliminating overlap, without limiting steering committee participants' understanding of the tools and process, the study team repeated this format in the Halifax phase of the project. As a result, Steps 1 and 2 were combined in a half-day visit with Halifax agency staff, ensuring they had received the material

well in advance for personal preparations and review. This proved to be a difficult task for one of the agencies, as they had fewer resources to dedicate to the recruitment process. As mentioned in the Key Findings section of this report, we would recommend agency resources be taken into account when deciding how the steering committee recruitment process plays out and by whom.

Meeting with the staff from each agency to review the benchmarks and survey tool is another important component of Step 2. It gives staff the opportunity to complete sample survey questions for various housing stability domains, and draw on data generated from agencies in Toronto to assist agency staff in providing more complete descriptions of their practices. Also, this step highlights the obvious overlap between domains and benchmarks, as none of the benchmarks truly exist in complete isolation. With this overlap apparent, participants also get a better understanding of the dynamic nature of the Housing Stability Model (*Figure 4*).

During the Halifax consultations, a lot of time was dedicated to describing how the program, agency and system functioned as a whole. This was given a focus due to the philosophic and systemic differences between Toronto and Halifax housing sectors.

Step 3: Data Collection

Using survey tools developed by the research team, designated staff from each of the participating agencies describes their current practices for achieving the identified benchmarks. In this study, the project coordinator from the CRPET collected and reviewed the data from each agency and responded to questions and concerns of participants. This process was helpful in that the data was more thorough and representative of the agency's actual practices.

Step 4: Data Analysis

After receiving the data from the partners, CRPET incorporates agency practice descriptions into a format that allows for a comparison between the agency's practice and the Toronto-based practices, as depicted in *A Guide to Improving Housing Stability: Benchmarks and Recommended Practices* (CRPET, 2003). Upon receiving and reviewing the data from the first phase of the study (Ottawa), the study team realized that too many benchmarks were identified and there was not enough time to discuss them all in a meaningful way. In order to condense the data to an amount that was feasible, the study team selected practice descriptions that represented a continuum of similarities and differences when compared to Toronto practice descriptions. In this way, the range of descriptions gave the steering committee and study team the opportunity to test the meaningfulness and relevance of Toronto-based practices when set against those from Ottawa. Both Ottawa agencies were open and flexible to proceeding in this manner.

Having learned from this time-restraint, Halifax partners were asked to select only two or three benchmarks (as opposed to five or six in Ottawa). As a result, all of the material given by the agencies was able to be included in the practice comparison charts and discussed in the review sessions to follow.

Step 5: Benchmark Review Sessions

The goals of these sessions is to have the research team work with each agency's steering committee to review current practices, establish how they relate to practices recommended by housing providers in Toronto, identify possible action plans for service improvement where required and identify possible challenges for service improvement.

For the review sessions, three study team members alternated co-facilitation and process observation roles. Facilitators sought to keep the discussion focused on answering the following questions for each benchmark:

- Are the agency's practices fully described?
- Does the practice description, as it appears, achieve the benchmark?
- Could this list of practices be improved by adopting any of the Toronto practices?
- If so, how would these improvements occur? What are the key challenges?
- Is there anything not mentioned by the benchmarks or recommended practices that are worth adding?

Throughout this process, the observer noted key elements of the process, content and interactions between steering group participants. During the mid-session break, the study team discussed challenges, strengths and group assumptions and modified the order and techniques of facilitation to accommodate the unique group dynamic.

Step 6: Discussion and Wrap-up Session

Following the review sessions, the research team develops and facilitates a half-day wrap-up workshop with all project participants to discuss key lessons learned from the project, solicit feedback from participants on the relevance and applicability of the benchmarks and study process, and improve the project concepts, methods and tools.

In Ottawa, steering group participants from both agencies (consumers, housing and support workers, researchers and program representatives), as well as two representatives from the Canada Mortgage and Housing Corporation attended the same session. In Halifax, due to each agency's programmatic responsibilities, it was impossible for the two agency steering committees to be scheduled for the same session, so separate wrap-up meetings were held with each.

Key Findings, Highlights and Challenges

Over the course of the study, team members noted key suggestions made by participants regarding the housing stability model, benchmarking concepts, process, and tools. This section outlines findings as regards to the model, the translation of key concepts across jurisdictions, communication processes, and learnings around resource allocation.
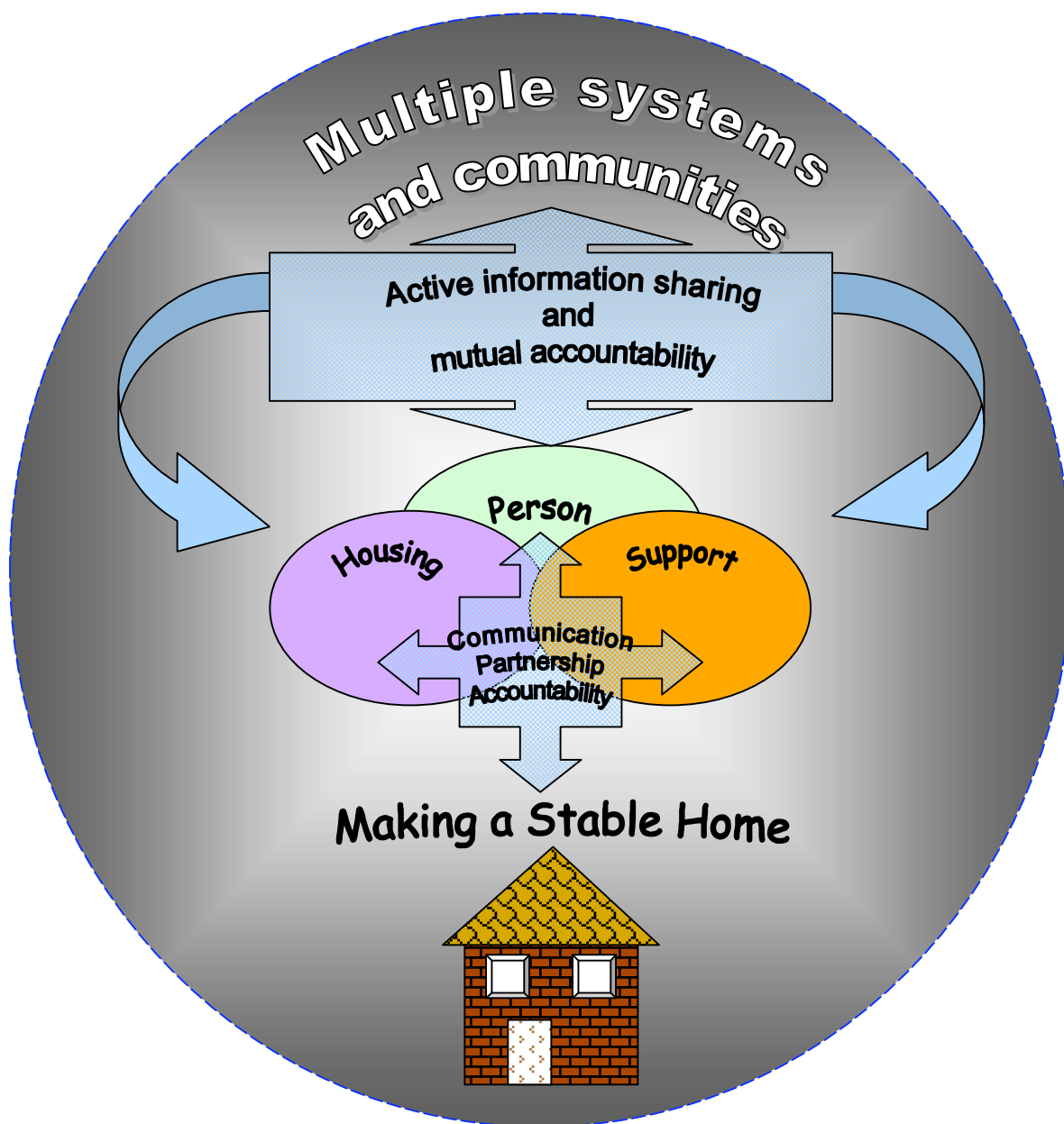
The Housing Stability Model

There is an emerging consensus that high quality, well-maintained housing programs that support individual choice and preference, that are managed in an empowering fashion, and that are coupled with client-centred, rehabilitation-oriented support, offer the best housing options for persons coping with a serious mental illness (Parkinson, Nelson and Horgan, 1999). This view is at the heart of the Housing Stability Model. In this study, participants were particularly positive about the model. In particular, participants liked how the consumer is actively implicated as an equal partner with housing and support networks. Participants also liked the simplicity of the model, and that making a stable home requires the input of a number of stakeholders.

In order to improve the model, participants from Ottawa recommended overlapping the variables of Person, Housing and Support, to symbolize the intersecting nature of the domains. They also recommended the Systemic variable be presented as more proximal to Person, Housing and Support variables through the use of two-way arrows, rather than separate boxes, imparting a dynamic of mutual accountability. They suggested that using colour and less-solid lines would bring out a sense of interconnectedness between systemic and person, housing, and support factors as well. Participants agreed that the ability to monitor effectively depends upon a solid foundation of relevant, up-to-date information that is accessible to all parties concerned. They saw the Monitoring piece as essential, in terms of ensuring accountability, total quality management and feedback loops, and ultimately leading to program improvement. In order to be accurately represented, they suggested "Monitoring" be changed to "Communication or Evaluation" and moved from "the basement" of the model, where it can be forgotten, to a more interactive space within and between variables.

Upon revising the model to the one shown below and presenting it to the steering committee participants in Halifax, the study team received very positive feedback. Participants liked the way the model looked, understood its message easily, and thought it captured what they were already trying to do within their own housing system. Participants also liked that the model portrayed housing stability in a holistic way, with an emphasis on tenant / resident choice in having housing and support needs met. They did not recommend any changes to be made to the revised version, shown on the next page.

Figure 4

A Model of Housing Stability – Revised

Multiple systems and communities

Active information sharing
and
mutual accountability

Person

Housing

Support

Communication
Partnership
Accountability

Making a Stable Home

Translating Benchmarks and Recommended Practices Across Jurisdictions

The term "benchmarking" had a positive connotation for both Ottawa and Halifax participants. The positive response in Ottawa was thought to be due to the political climate of Canada's capital city, and the constant exposure of its citizens to political words and processes. In Halifax, there was a lot of excitement in being included in a research study for improving housing stability, as there was a sense that their unique issues were often excluded due to their geographic location.

All participants were similar to those in Toronto regarding their difficulties in grasping "benchmarking" as a term that was not about quantifiable outcomes, but rather the quality of processes. Most participants who had previous experience with benchmarking associated it with a quantitative, measurable approach to research that sought to establish standards of practice. Their experience with process benchmarking was relatively new and as a result many terms, concepts and processes needed to be explained on an ongoing basis. Participants appreciated seeing benchmarks as "soft" reference points to facilitate an individual or group to think about their practices rather than prescribed outcomes from a one-size-fits-all approach. Consumers found it helpful to see benchmarks as "tools of the trade", highlighting general guidelines to strive towards, and recommended that these terms be used to facilitate understanding in future benchmarking projects.

Participants found the benchmarking approach a useful tool to gain perspective on their work, including areas of strength and those requiring improvements. Although many of the benchmarks are applicable across cities, the practices themselves may look quite different depending on the culture and norms of the city, and the type of housing offered. Due to the challenges in adapting Toronto-based benchmark language to reflect the Ottawa and Halifax context, having individuals from Toronto present to assist with building understanding and providing context for some of the practices was instrumental in being able to meaningfully compare practices across housing jurisdictions.

In translating practices for the review sessions, it proved difficult to find a format that presented the practice descriptions in a way that was easy to follow, particularly because of the vast amount of information needing to be reviewed. For future processes, a simple, visually accessible format for description charts is recommended.

Communication Processes

It was helpful to give each benchmark partner a list of the benchmarks at the introductory session, to give them time to prepare for the review sessions (See Appendix B for a list of the Benchmark-Areas and corresponding Benchmarks). Participants felt that it was a lot of information to absorb, and they had to read through the benchmarks a number of times in order to identify overlap between their own experience with the housing and support system locally, and the benchmarks derived from Toronto. Therefore, the presentation of this information in flowcharts were a helpful compass for benchmark navigation at all stages of the

process (As depicted in "*A Guide to Housing Stability: Benchmarks and Recommended Practices*", CSRU 2003).

During the review sessions, participants thought that the study team's willingness to have a flexible process while keeping the group on track was crucial to creating an open dialogue while maintaining some structure within the group. They found it useful to have an external facilitator who was neutral, respected all individuals present, and was able to redirect the meeting when necessary. There was a challenge in balancing structure and flexibility within the sessions, and participants expressed a number of preferences where the presence or absence of structure was concerned. The observer played a crucial role in ensuring that the process was meaningful, flexible, and timely, by translating observations into recommended changes to the process.

> *The facilitation was wonderful! It was a major factor in the success of this process. (Steering Committee Participant)*

Also, a number of sensitive issues arose, and it was important to give participants the time and respect required to describe their experience with the benchmark and practices. For tenant / resident participants, this often meant telling their story. For staff, it might have required them to explain the context within which a decision or practice played out. As a result, it was extremely beneficial having facilitators skilled in group facilitation, because a culture of patience, trust and respect needed to be maintained while keeping the group on task.

> *"Through this process, we shared many good ideas as to current practices and how the various departments could communicate better in the future." (Steering Committee Participant)*

The benchmarking process requires motivation and communication between professionals of a variety of disciplines (Stark, et. al 2002). Although coming to consensus was difficult, participants considered the process of comparing practices a useful way to test the benchmarks because of the opportunity to place them under the scrutiny of experienced staff, managers and tenants. Steering group members appreciated using the tool and process as a brainstorming exercise, an idea generator, an educator (for both staff and clients), and a forum for evaluation. They also found it to be a good way to network with others in the field and learn how the various stakeholders and departments could communicate better. While consumer participants found it helpful to learn how agencies work, staff found it helpful to learn how other partners and departments work, and felt better equipped after the review sessions to work together. Ultimately, discussions held in this manner create a culture of empowerment through collaboration, serving as a networking and partnership-building tool for a number of participants. Not only did stakeholders discuss the benchmarks and practices, they shared resources and disseminated relevant information to one another on how to address some of the challenges to housing stability.

Resource Allocation

> *"As individuals engage in community organizing efforts and community building, community empowerment outcomes can include increased sense of community, greater participatory processes and community competence, and outcomes of actual changes in policies, transformed conditions, or increased resources that may reduce inequities. As communities become empowered and better able to engage in collective problem-solving, key health and social indicators may reflect this, with rates of alcoholism, divorce, suicide, and other social problems beginning to decline. Moreover, the empowered community that works effectively for change can bring about changes in some of the very problems that contributed to its illness in the first place." (Minkler and Wallerstein, 1999, p. 41)*

The end products of benchmarking are invaluable in terms of improved communication and coordination between sectors, increased empowerment for community participants, and improved service delivery as a whole. At the same time, benchmarking is a resource-intensive activity. It was clear at all stages of the process that the study team was required to be flexible to the resources available to participating agencies, and negotiate on an ongoing basis how to make the process meaningful for all involved.

Time spent by staff and steering committee participants in completing the survey, getting acquainted with the material, attending review sessions, attending a final wrap-up session, and communicating on an ongoing basis with the study team, consumed a great deal in terms of human and financial resources. As pressure mounted to reduce costs, benchmark partners were required to select the critical few benchmarks they would most benefit from investing the time and human resources required for this process. For instance, due to time constraints, most participants did not feel they could adequately work through the systems domain, because of the complex inter-connectedness of systemic factors across each of the other domains, and the resource intensive nature of delving into such a vast arena of practice.

> *"Ultimately, a collaborative approach is economical, permitting more organizations to take full advantage of the potential effects of successful benchmarking, one of which is improved cooperation among health care providers."*
> *(Gift and Mosel, 1994)*

Also, a number of things can come up to challenge the pre-determined time allotted for the discussion. One benchmark, for example, may be seen as particularly relevant to improving housing stability for their steering committee members, requiring more time to work through. An unpredictable tension existing between stakeholders might surface as well, thus requiring more time to understand perspectives, share knowledge, and work through the issue

in a meaningful way. If an extended discussion was to occur around one benchmark, then, the group would need to decide if it was an appropriate trade to having a shorter discussion for the following benchmark, or if the time together should be extended. For future benchmarking processes, it would be important for participating stakeholders to consider the potential tensions that could surface among community participants, when deciding which benchmarks to dedicate the benchmarking process to.

Next Steps

> "A relatively small and seemingly insignificant group at the margins of power can create an attractive centre capable of becoming the new nucleus of a transformed system."
> (Bopp, M., and Bopp, J. 2001)

Over the course of this study, it became clear that building relationships based on a common vision rather than a desire to dominate or compete, is a key ingredient for re-creating improved housing and support systems. Working with communities to align and unify their efforts through the honest comparison of values, practices, and processes across systems also equips networks with the tools to own and address challenges collaboratively, given appropriate resource allocation. In the period of time spent with each city, a host of next steps were established for both agency partners and the CRPET.

Halifax and Ottawa Partners

Consumer and Family Empowerment

- Developing a consumer panel / group to educate individuals, community agencies, institutions, and ministries about the significance of housing stability in achieving wellness (e.g., "Open Minds" in Ottawa, "Dream Team" in Toronto).
- Developing training for consumers so they can become more involved in evaluating services at local and systemic levels (e.g., developing consumer-driven groups; using existing councils as an avenue to ensure consumer input into ethics, management and decision making; and involving existing tenants in the tenant selection process).

Improving Current Practice

- Using the practices outlined within staff job descriptions to compare an agency's current practices to those recommended by other jurisdictions.

- Developing a more transparent intake and selection process.
- Improving sensitivity and supports for family members and peers.

Developing New / Improving Current Partnerships

- Following the identification of specific areas for improvement, developing partnerships to work together at improving services on inter-agency and systemic levels.
- Formalizing service agreements and consent agreements for release of information.
- Articulating philosophy, vision and values to other agencies using the information gathered through the benchmarking process.
- Developing more links to agencies, services and funders.
- Building consensus on what 'supportive housing' means among the local community.
- Developing a local housing guide and media campaign to describe services available

The Community Research, Planning and Evaluation Team

Disseminating Information

- Presenting process and findings at provincial, national and international conferences.
- Disseminating the final report to all stakeholders.
- Developing and disseminating a "Benchmarking Housing Stability" quarterly newsletter.
- Developing and disseminating benchmarks and recommended practices in a variety of useful formats (checklist, key word flowchart, surveying manual, steering committee facilitator's manual, presentations to key stakeholders, journal articles, etc.).

Continued Collaboration

- Continuing to collaborate with agency partners and steering committee participants on a supportive basis.
- Working with agencies and initiatives in Canadian cities other than those involved in this study, to implement benchmarking processes and improve housing stability across Canada.
- Working within systems in the application and support of process benchmarking to improve housing stability networks provincially, nationally and internationally

Further Study

- It has been noted by a number of participants and key informants that it would be useful to test the fidelity of the benchmarks in achieving housing stability, an endeavour the CRPET could pursue in the future.
- The analysis of similarities and differences in findings between the Housing Stability Validity Study, Housing Stability Benchmarking Study, and Housing Policy Study (which aims to recommend a feasible, values-based best-practice framework for the reform of mental health housing and supports for people with serious mental illnesses in Ontario, and is also being implemented by the CRPET) to inform future projects.

It is evident that, based on the feedback received at various stages of this project, the benchmarking tools and processes developed through this work hold much promise for collaborative improvements of housing stability locally, provincially, and nationally.

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Appendices

Appendix A – Glossary of Terms

Benchmarking Housing Stability

Glossary of Terms

The Housing Stability Model and Definitions

In November 2001, the Community Support and Research Unit submitted a report to the Canada Mortgage and Housing Corporation (Evaluating housing stability for people with serious mental illness at risk of homelessness, CSRU, 2001), which included a model of Housing Stability. According to this model, achieving housing stability requires ensuring continuous access to housing that promotes health and an optimal quality of life through flexible housing, housing programs, and housing systems that are responsive to, and can accommodate change. This model specifies key areas that must be effectively addressed in order to promote housing stability for people with serious mental illness including the person, housing, support, and agency / inter-agency / systems-level variables.

Person Factors

Each person brings characteristics, goals, preferences, strengths and needs to a housing situation. Tenants / residents can differ considerably in each of these areas. These factors address screening and assessment procedures that promote an optimal fit between the individual and available housing and support options.

Support Factors

The kinds of support people bring to housing situations and/or the support they receive while in the housing are critical. Key sources of support include:

Professional support providers (e.g., case managers, housing support workers)

Paraprofessional support providers (e.g., consumer self-help groups, peer support); and

Informal support providers (e.g., family, friends)

A team of support providers, working together with the tenant / resident, is critical for ensuring that consumers can respond to the every day challenges of living in their housing. Support providers can attend to the psychological and social aspects of housing that are associated with stronger attachment and the feeling of "home" (meaningful daily activities, control over physical environment and over use of time, opportunities to achieve personal goals, perceived ability to maintain residence). A team of supports can provide the information, monitor the housing situation for problems that may arise, and provide an appropriate response when problems do arise. This includes support that provides individuals with appropriate information about the housing market and their rights as tenants, that adapts to individuals' changing needs and preferences, and that helps them to achieve their personal goals.

Housing Factors

Housing quality is a critical factor related to housing stability. High quality housing is expected to be more stable and reduce the risk for homelessness by supporting recovery and promoting an optimal quality of life.

Physical House Quality (safety/security, cleanliness, air & water quality, atmosphere, privacy)

Tenure (tenant vs. patient, funding to hold housing should individual temporarily return to hospital, accountability structures, control over the housing environment by the consumer)

Community Integration (housing is offered in a non-stigmatizing way, there is access to community resources and activities, housing is provided in a safe neighbourhood)

Capacity for Flexibility (housing is provided in a flexible manner that can accommodate consumers within the target population who differ in terms of their needs, abilities and preferences; housing is provided in a flexible manner that can accommodate consumers as their needs, abilities and preferences change over time). Management (housing providers and partners are accountable to the consumer).

Agency / Inter-Agency / Health System Factors

The housing stability of tenants / residents is affected by factors located at broader systems levels (agency, inter-agency and governmental). Systemic factors can be a root cause of

instability. Inadequate housing options can mean that the process of matching tenants / residents to housing is perfunctory. A complete housing assessment may be deemed unnecessary when the likelihood of satisfying tenant / resident needs is low. Housing situations may be inadequately monitored because support providers do not have sufficient resources. Tenants / residents may be trapped in unstable housing situations because no alternatives can be found. Although not directly under the control of the housing provider, agencies can take several steps to counteract systemic factors or to advocate for change.

Benchmarking Definitions

Benchmarking in health care settings refers to "…the continual and collaborative discipline of measuring and comparing the results of key work processes with those of best performers. It is learning how to adapt these best practices to achieve breakthrough process improvements and build healthier communities" (Gift & Mosel, 1994).

Benchmark Evaluation Procedure

The benchmark evaluation procedure is a process developed by the Community Research, Planning and Evaluation Team (Evaluating housing stability for people with serious mental illness at risk of homelessness, CSRU, 2001). Through this procedure, housing providers and their partners can compare their current housing and support practices against established benchmarks across the four categories of Housing Stability.
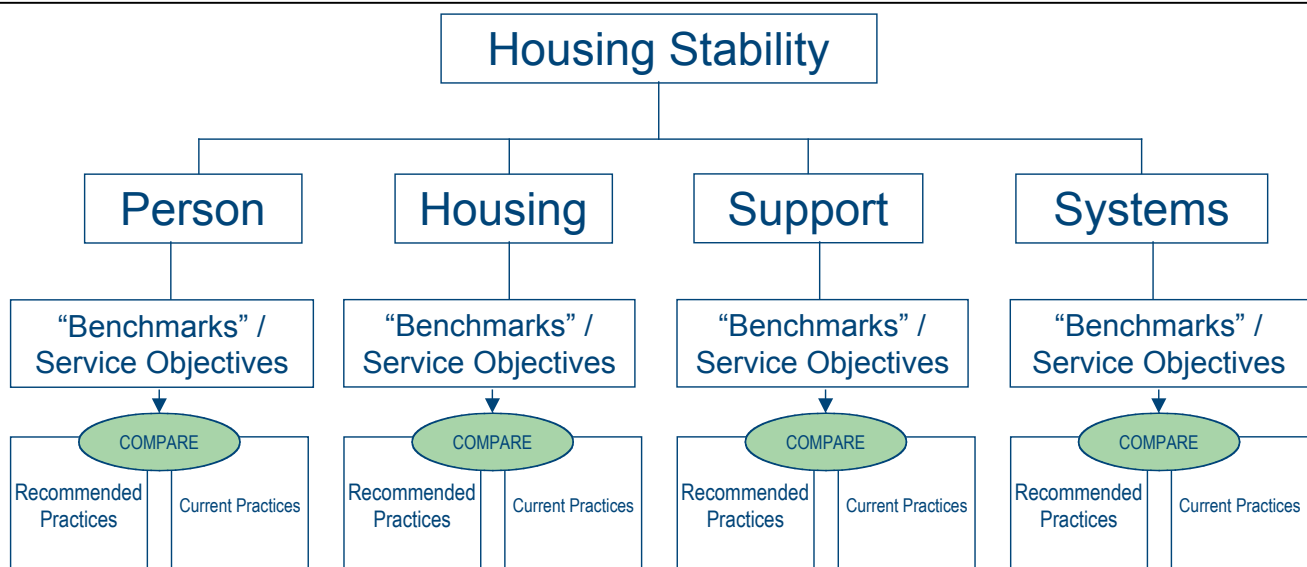
Process Benchmarking

In essence, process benchmarking means looking at how different agencies perform specific functions or services in order to identify innovative practices. In other kinds of benchmarking studies the goal is to identify quantifiable outcomes against which agencies are measured. This is <u>not</u> the goal of this study. Instead, this study involves an examination of the practices and procedures of several agencies that provide similar services.

Benchmarks

Benchmarks are service objectives that many housing providers already, or can, strive to achieve to promote housing stability for people with serious mental illness. The benchmarks are meant to describe a broad range of service objectives that housing providers can work toward in order to promote housing stability for their residents. In this study, they are identified in four categories: "Person", "Housing", "Support", and "Agency/Inter-Agency, and Systems".

The benchmarks are <u>not</u> standards, and not all benchmarks identified in this project apply to all housing providers. The housing providers participating in this study vary considerably in the number of people they help house, their mandates, and the range of services that they offer. Therefore, one of the goals of the study is to understand which benchmarks housing providers do work toward, and what are the innovative and effective practices that are currently in place that achieve these benchmarks.

Benchmark Areas

In "A Guide to Housing Stability: Benchmarks and Recommended Practices", benchmarks have been organized within broader "Benchmark Areas" in order to simplify the work. Benchmark Areas collect individual benchmarks that would have similar outcomes for clients or that could be achieved through similar practices. The "Person" category for instance, has 3 broad Benchmark Areas and a list of Benchmarks under each of those.

Practice Components

Practice components are elements of strategies for achieving benchmarks in benchmark areas. Practice components were developed from the *Housing Stability Benchmarking Study*, based on a review of the data provided by agencies in their surveys. A principal task of the

Working Group was to review practice components and determine whether they adequately covered the critical elements required to adequately satisfy benchmarks in each area.

Practices

Practices are the particular practices and activities that agencies reported on their surveys that they carry out to achieve benchmarks within each of the benchmark areas. In *"A Guide to Housing Stability: Benchmarks and Recommended Practices"*, they appear as a list beneath each *practice component*.

Participants

Working Group

This group was formed for the *Housing Stability Benchmarking Study and Educational Workshops*, and included representatives from local housing agencies, representatives from support agencies, consumers of housing services, consumer advocates, and representatives from municipal government. Members of this team worked to identify benchmark practices within each of the major categories of the Housing Stability Model.

Benchmark Partners

Ten supportive housing providers in the Greater Toronto Area participated as Benchmark Partners in the *Housing Stability Benchmarking Study and Educational Workshops*. These agencies described their practices within each of the Housing Stability categories using the *Housing Stability Survey*. In the Housing Stability Validity Study Final Report, the agencies completing the survey are referred to as "agency partners" or "staff" rather than "Benchmark Partners".

Steering Committee Participants

In the Housing Stability Validity Study, each agency was responsible for the recruitment of members for their steering committee. Steering committees consist of a broad range of stakeholders familiar with the host agency's practice, and have the responsibility of reviewing and discussing how local practices compare to recommended practices (as depicted in "*A Guide to Housing Stability: Benchmarks and Recommended Practices*", CRPET, 2003).

Appendix B – Housing Stability Benchmarks

Person Domain

Area 1: Promoting Tenant/Resident Access, Preference and Choice

Benchmarks:

- Information regarding available housing and support options is clearly communicated by the agency to potential tenants/residents.
- The housing provider collaborates with applicant or potential tenant/resident and other supportive figures (e.g., case manager) to identify fit between the individual's housing and support needs and preferences, and the housing and support provided by the agency and its partners.
- Potential tenants/residents have an opportunity to be involved in the program's application / intake process, are able to monitor their progress (e.g., status on waiting list), and that the process is: transparent, understandable, and flexible.
- During the application/intake process, the potential tenant's/resident's preferences and needs are documented, discussed, and accommodated where possible.
- Once housed, the tenant's/resident's housing and support preferences are monitored and accommodated where possible.

Area 2: Supporting Diversity

Benchmarks:

- Tenants/residents are able to openly express diverse housing and support needs and have them accommodated.
- Tenants'/residents' diverse housing and support needs are continually monitored and changes are accommodated (e.g., ethnoracial community memberships, gays/lesbians/bisexuals, transgender individuals, and persons with visible and invisible disabilities).

Area 3: Promoting Affordability and Income Security

Benchmarks:

- The housing provider takes necessary steps to ensure affordability (e.g. efforts are taken to reduce costs associated with housing beyond rent).
- Tenants/residents are supported in accessing and maintaining their benefits.

Housing Domain

Area 1: Maintaining the Housing

Benchmarks:

- The housing and neighbourhood are safe and secure.
- The housing is clean and well maintained, and complaints regarding the maintenance of the housing are addressed in a timely and effective manner.

> ➤ The housing promotes accessibility and accommodates the changing needs of its tenants/residents (e.g. wheelchair access, Braille services, sound devices for the hearing impaired).

Area 2: Providing Capacity for Rehabilitation

Benchmarks:

> ➤ The facility promotes the development and maintenance of daily living and psychosocial skills (e.g., access to laundry facilities, cleaning supplies, learning kitchen skills).
> ➤ Tenants/residents have access to neighbourhood amenities (e.g. grocery stores, coffee shops, transportation).

Area 3: Promoting Open Communication and Accountability

Benchmarks:

> ➤ Tenants/residents are informed and can act on their rights and responsibilities (e.g., external / internal advocacy options, Client Council).
> ➤ The housing provider offers clear mechanisms for problem solving and conflict resolution.
> ➤ Tenants/residents play an active role in developing and monitoring agency policies and housing rules.
> ➤ Tenants/residents and other stakeholders are informed of management decisions affecting housing and related support services in an accessible, timely and ongoing manner.

Support Domain

Area 1: Providing Information

Benchmarks:

> ➤ Tenants/residents receive information, and/or know how to access information about housing and new housing opportunities.
> ➤ Tenants/residents receive information, and/or know how to access information about community resources, neighbourhood amenities, activities, and services related to successful community living.

Area 2: Supporting Open Communication

Benchmarks:

> ➤ Housing agency staff strives to develop and maintain relationships with tenants/ residents that emphasize mutual trust and respect.
> ➤ Tenants/residents, housing agency staff, and support providers communicate effectively with one another in ways that promote housing stability and remain respectful of tenants'/residents' rights to privacy and autonomy.
> ➤ Tenants/residents, housing agency staff, and support providers collaborate to determine roles and responsibilities, which are communicated to stakeholders.
> ➤ Tenants/residents, housing agency staff, and support providers are accountable to one another for their roles and responsibilities.

Area 3: Providing Housing Support

Benchmarks:

- ➢ Tenants/residents are supported in a way that promotes comfort, safety, and positive living experiences (e.g., social activities).
- ➢ Tenants/residents have access to housing supports and services to live successfully in their housing (e.g., housing maintenance, resolving tenancy issues, resolving disputes with neighbours).

Area 4: Providing Individualized Support

Benchmarks:

- ➢ Tenant/resident-directed support is understood and provided.
- ➢ Tenants/residents are supported to collaborate with a range of flexible, responsive support providers they choose (including professional, peer, and informal support) that helps them to
- ➢ Tenants/residents are supported to collaborate with a range of flexible, responsive support providers (including professional, peer, and informal support) that helps them to achieve their personal goals (e.g., rehabilitation support) to the extent that they desire.
- ➢ Tenants/residents are linked with community supports based on their needs and preferences.
- ➢ Tenants/residents are supported in developing supportive, informal relationships with peers and friends to the extent that they desire.
- ➢ When needed, tenants/residents collaborate with housing agency staff and support providers to help them find housing and to make the transition to or between housing that suits their preferences and needs.

Area 5: Providing Crisis Response

Benchmark:

- ➢ Tenants/residents have access to support to enable them to respond to crisis situations.

Agency, Inter-Agency, System Domain

Area 1: Keeping Informed

Benchmarks:

- ➢ Standard information on best practices is routinely created, gathered, and reviewed.
- ➢ Staff, board members, and tenants/residents have the training, experience, and knowledge to work effectively in the mental health housing and support systems.
- ➢ The mental health housing system and programs are routinely evaluated (e.g., access, partnerships, tenant/resident satisfaction, tenant/resident outcomes, best practices).
- ➢ Information on best practices and tenant/resident needs is integrated into agency practice and system development.

Area 2: Agency Practices and Policies Promote Agency Stability

Benchmarks:

➢ Human resource practices and accountability mechanisms support housing stability and staff retention (e.g., procedures, policies, and organizational culture to deter staff turnover).
➢ A set of business practices is created and used to promote housing development.
➢ Agency transfer policies and processes reflect the changing needs of tenants/residents.

Area 3: Playing an Active System Role (networking, advocating, partnering)

Benchmarks:

➢ The mental health housing system, housing and support providers demonstrate accountability to one another and other stakeholders.
➢ The mental health housing system, housing and support providers collaborate to support residents in moving smoothly within the housing system.
➢ The mental health housing system, housing and support providers promote the development of new housing.
➢ Housing and support providers advocate for tenants/residents to promote access to an appropriate range of housing models and services.

Appendix C – Sample Section: Housing Stability Survey

Section 3: Benchmark Practices

Housing

Housing quality is a critical factor related to housing stability. High quality housing is expected to enhance the tenant's/resident's housing stability and reduce the risk for homelessness by supporting recovery and promoting an optimal quality of life. These benchmarks refer to qualities of the physical house and neighbourhood which promote accessibility, safety, and cleanliness.

BENCHMARK-AREA: 1. Maintaining the Building / Setting.
Benchmarks
➢ The building / setting and neighbourhood are safe and secure.
➢ The building / setting is clean and well maintained.
➢ The building / setting promotes accessibility and accommodates the changing needs of its tenants/residents (e.g. wheelchair access, brail services, sound devices for the hearing impaired).
➢ Complaints regarding the maintenance of the building / setting are addressed in a timely and effective manner (e.g. tenants/residents have access to an external monitoring body to communicate complaints if necessary).

In the questions below, please make note of times you have demonstrated flexibility, evaluated processes / practices, and involved tenants/residents in the different aspects of this Benchmark-Area.

1. Does this Benchmark-Area fall under your agency's mandate/goals? Yes   No
[If your answer to Question 1 is no, please skip to Question 4 below.]

2. If your answer is yes to Question 1, please rank how much of a priority this Benchmark-Area is within your mandate / goals.

1	2	3	4	5
Low		Medium Priority		High

3. In the chart below, please clearly describe what your agency does to achieve each of these benchmarks including:
✓ critical key steps;
✓ procedures and program features;
✓ who is responsible for carrying it out;
✓ the role of tenants/residents in the activity;
✓ elements of your practice that are innovative and unique;
✓ and any other information that may help someone unfamiliar with your agency to understand what you do.

In the third column, please rate how effective your agency is at maintaining the building / setting, using the following scale:

1	2	3	4	9
Very ineffective	Somewhat ineffective	Somewhat effective	Very effective	N/A

If the benchmark is not applicable to your agency, please identify this in the descriptor column. *Please see the guide for further instructions.*

BENCHMARK-AREA: 1 Maintaining the Building / Setting	Benchmark Practice Description	RATING
The building / setting and neighbourhood are safe and secure.		
The building / setting is clean and well maintained.		
The building / setting promotes accessibility and accommodates the changing needs of its tenants/residents (e.g. wheelchair access, brail services, sound devices for the hearing impaired).		
Complaints regarding the maintenance of the building / setting are addressed in a timely and effective manner (e.g. tenants/residents have access to an external monitoring body to communicate complaints if necessary).		

4. Please describe any challenges/tensions/issues facing your agency that affect your ability (both positively and negatively) to meet these benchmarks effectively (e.g. availability of resources, competing priorities, factors beyond agency's control).

5. Who is responsible for addressing these issues instead of / in addition to you? (e.g. formal or informal partnerships with other organizations, volunteer organizations, professionals, etc.).

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